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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/733,345	12/12/2003	Gorsev Pristine	P1977US00	7456
54640 7590 06/09/2009 PERRY + CURRIER INC. 1300 YONGE STREET SUITE 500 TORONTO, ON M4T-1X3 CANADA				
EXAMINER ALTSCHUL, AMBER L				
ART UNIT 3686		PAPER NUMBER		
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Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Office Action Summary

Application No.

10/733,345

Applicant(s)

PRISTINE, GORSEV

Examiner

AMBER L. ALTSCHUL

Art Unit

3686

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --
Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) ☒ Responsive to communication(s) filed on 23 April 2009.
- 2a) ☐ This action is **FINAL**. 2b) ☒ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) ☒ Claim(s) 1-18 is/are pending in the application.
- 4a) Of the above claim(s) _____ is/are withdrawn from consideration.
- 5) ☐ Claim(s) _____ is/are allowed.
- 6) ☒ Claim(s) 1-18 is/are rejected.
- 7) ☐ Claim(s) _____ is/are objected to.
- 8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☐ The drawing(s) filed on _____ is/are: a) ☐ accepted or b) ☐ objected to by the Examiner.
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All b) ☐ Some * c) ☐ None of:
1. ☐ Certified copies of the priority documents have been received.
 2. ☐ Certified copies of the priority documents have been received in Application No. _____.
 3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

- 1) ☒ Notice of References Cited (PTO-892)
- 2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948)
- 3) ☐ Information Disclosure Statement(s) (PTO/SF/ICE)
Paper No(s)/Mail Date _____
- 4) ☐ Interview Summary (PTO-413)
Paper No(s)/Mail Date _____
- 5) ☐ Notice of Informal Patent Application
- 6) ☐ Other: _____

DETAILED ACTION

Continued Examination Under 37 CFR 1.114

1. A request for continued examination under 37 CFR 1.114, including the fee set forth in 37 CFR 1.17(e), was filed in this application after final rejection. Since this application is eligible for continued examination under 37 CFR 1.114, and the fee set forth in 37 CFR 1.17(e) has been timely paid, the finality of the previous Office action has been withdrawn pursuant to 37 CFR 1.114. Applicant's submission filed on April 23, 2009 has been entered.

Response to Amendment

2. This communication is in response to the amendment filed on April 23, 2009. Claims 1-18 are pending in this present application. Claims 8 and 15 have been amended.

Claim Rejections - 35 USC § 103

3. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

4. Claims 1-18 are rejected under 35 U.S.C. 103(a) as being unpatentable over United States Patent Application Publication Number US 2002/0077865, Sullivan, et al., hereinafter Sullivan, in view of United States Patent Number US 6,151,581, Kraftson, et al., hereinafter Kraftson.

5. (Previously Presented) Regarding claim 1, Sullivan teaches a computing device for location proximal to a waiting area of a hospital emergency room and for intake of a patient in said hospital emergency room comprising:

a touch-screen operable to receive input by allowing said patient to depress active portions along the surface of said touch-screen, said touch screen further operable to display information to said patient, (page 3, para. 66);

said computing device further comprising a set of headphones connected to said computing device for presenting audio output to said patient, (page 5, para. 85); and

wherein said computing device is configured to receive an identification of said patient and a preferred language of said patient, and further operable to present on said touch screen at least one main question and a plurality of dependent questions presented based on a response to said main question and responses to previous dependent questions, said questions presented in said preferred language of said patient, said questions pertaining to an intake procedure of said patient to said hospital, said device further operable to receive responses to each of said of said questions by touch screen input from said patient, said device further operable to generate an intake report based on said responses in a preferred language of a hospital staff member responsible for further processing of said intake of said patient, (abstract, page 8, para. 125). Sullivan does not explicitly teach a plurality of dependent questions based on a response to said main question and responses to previous dependent questions. However, Kraftson teaches a plurality of dependent questions based on a response to said main question and responses to previous dependent questions, (column 6, lines 19-31). It would have been obvious to one of

ordinary skill in the art to combine Sullivan and Kraftson. The motivation would have been to provide the most effective treatment for a disease or patient problem. (Kraftson, col. 1, lines 41-57).

6. (previously presented) Regarding claim 2, Sullivan teaches the device of claim 1 as described above. Sullivan further teaches wherein said computing device is attachable to a printing device local to said computing device and wherein said report is generated at said printing device, (page 8, para. 125).

7. (previously presented) Regarding claim 3, Sullivan teaches the device of claim 1 as described above. Sullivan further teaches wherein said computing device is connected to an intake server via a network, and wherein said report is delivered to said intake server, (page 4, para. 75).

8. (previously presented) Regarding claim 4, Sullivan teaches the device of claims 1 and 3 as described above. Sullivan further teaches wherein said intake server is attachable to a printing device local to said intake server and wherein said report is generated at said printing device, (page 9, para. 134).

9. (previously presented) Regarding claim 5, Sullivan teaches the device of claims 1 and 3 as described above. Sullivan further teaches wherein said intake server is connected to a plurality of treatment room client computing devices via said network, and wherein said treatment room clients include an output device, (page 7, para. 114).

10. (previously presented) Regarding claim 6, Sullivan teaches the device of claim 1 as described above. Sullivan further teaches wherein said device is mounted within the housing of a Kiosk, (page 3, para. 66).

11. (previously presented) Regarding claim 7, Sullivan teaches the device of claim 1 as described above. Sullivan further teaches wherein said device is a stand-alone personal computer, (page 4, para. 78).

12. (currently amended) Regarding claim 8, Sullivan teaches in a computing device for location proximal to a waiting area of a hospital emergency room comprising a touch-screen operable to receive input by allowing depression of active portions along the surface of said touch-screen, said touch screen further operable to display information, a method for intake of a patient in said hospital emergency room, (page 3, para. 66), comprising the steps of:

receiving input from said touch screen representing a preferred language of said patient, (abstract, page 8, para. 125);

receiving input from said touch screen representing an identification of said patient, (abstract, page 8, para. 125);

presenting an intake question to said patient on said touch-screen, (pages 3-4, para. 67);

receiving response input from said touch screen representing a responses to said intake

questions, (pages 3-4, para. 67). Sullivan does not explicitly teach repeating said representing and said receiving response input steps based on responses to previous

intake questions. However, Kraftson teaches repeating said representing and said

receiving response input steps based on responses to previous intake questions, (column

- 6, lines 19-31). It would have been obvious to one of ordinary skill in the art to combine Sullivan and Kraftson. The motivation would have been to provide the most effective treatment for a disease or patient problem. (Kraftson, col. 1, lines 41-57); repeating said presenting and said receiving response input steps based on responses to previous intake questions until a desired number of intake question responses have been received, (pages 3-4, para. 67). Sullivan does not explicitly teach repeating said representing and said receiving response input steps based on responses to previous intake questions. However, Kraftson teaches repeating said representing and said receiving response input steps based on responses to previous intake questions, (column 6, lines 19-31). It would have been obvious to one of ordinary skill in the art to combine Sullivan and Kraftson. The motivation would have been to provide the most effective treatment for a disease or patient problem. (Kraftson, col. 1, lines 41-57); and generating an intake report in a preferred language of a hospital staff member responsible for further intake of said patient, (abstract, page 8, para. 125).
13. (previously presented) Regarding claim 9, Sullivan teaches the method of claim 8 as described above. Sullivan further teaches wherein said computing device is attachable to a printing device local to said computing device and wherein said report is generated at said printing device, (page 9, para. 134).
14. (previously presented) Regarding claim 10, Sullivan teaches the method of claim 8 as described above. Sullivan further teaches wherein said computing device is connected to an

intake server via a network, and wherein said report is delivered to said intake server, (page 4, para. 75).

15. (previously presented) Regarding claim 11, Sullivan teaches the method of claims 8 and 10 as described above. Sullivan further teaches wherein said intake server is attachable to a printing device local to said intake server and wherein said report is generated at said printing device, (page 9, para. 134).

16. (previously presented) Regarding claim 12, Sullivan teaches the method of claims 8 and 10 as described above. Sullivan further teaches wherein said intake server is connected to a plurality of treatment room client computing devices via said network, and wherein said treatment room clients include an output device, said intake server operable to determine an available one of said treatment rooms and to direct said report to said treatment room client computing device respective to said available one, (page 7, para. 114).

17. (previously presented) Regarding claim 13, Sullivan teaches the method of claim 8 as described above. Sullivan further teaches wherein said computing device is mounted within the housing of a kiosk, (page 3, para. 66).

18. (previously presented) Regarding claim 14, Sullivan teaches the method of claim 8 as described above. Sullivan further teaches wherein said computing device is a stand-alone personal computer, (page 4, para. 78).

19. (currently amended) Regarding claim 15, Sullivan teaches a computer readable media for storing programming instructions for use with a computing device for location proximal to a waiting area of a hospital emergency room comprising a touch-screen operable to receive input

by allowing depression of active portions along the surface of said touch-screen, said touch screen further operable to display information, and a method for intake of a patient in said hospital emergency room, (page 3, para. 66), comprising the steps of:

receiving input from said touch screen representing a preferred language of said patient, (abstract, page 8, para. 125);

receiving input from said touch screen representing an identification of said patient, (abstract, page 8, para. 125);

presenting an intake question to said patient on said touch-screen, (pages 3-4, para. 67);

receiving response input from said touch screen representing a responses to said intake questions, (pages 3-4, para. 67);

repeating said presenting and said receiving response input steps based on responses to previous intake questions until a desired number of intake question responses have been received, (pages 3-4, para. 67); and

generating an intake report in a preferred language of a hospital staff member responsible for further intake of said patient, (abstract, page 8, para. 125).

Claim 15 is rejected for the same reasons as set forth in claims 1 and 8 above.

20. (previously presented) Regarding claim 16, Sullivan teaches a system for intake of a patient in said hospital emergency room comprising at least one computing device associated with a waiting area of a hospital emergency room, (page 7, para. 114), and a comprising:

a touch-screen operable to receive input by allowing said patient to depress active portions along the surface of said touch-screen, said touch screen further operable to display information to said patient, (page 3, para. 66);

said computing device further comprising a set of headphones connected to said computing device for presenting audio output to said patient, (page 5, para. 85);

and wherein said computing device is configured to receive an identification of said patient and a preferred language of said patient, and further operable to present on said touch screen at least one main question and a plurality of dependent questions presented based on a response to said main question and responses to previous dependent questions, said questions presented in said preferred language of said patient, said questions pertaining to an intake procedure of said patient to said hospital, said computing device further operable to receive responses to each of said questions by touch screen input from said patient, said computing device further operable to generate an intake report based on said responses in a preferred language of a hospital staff member responsible for further processing of said intake of said patient, (abstract, page 8, para. 125);

said system further comprising an intake server for connection to said computing devices and for receiving intake reports generated thereby, (page 4, para. 75);

said system further comprising a plurality of treatment room clients connected to said intake server, said treatment room clients including an output device operable to present said intake reports, (page 4, para. 75 and page 8, para. 125);

said server operable to direct said intake reports to an appropriate one of said treatment room clients according to a prioritization criteria, (page 7, para. 117).

21. (previously presented) Regarding claim 17, Sullivan system the method of claim 16 as described above. Sullivan further teaches wherein said device is a kiosk located in said waiting room, (page 3, para. 66).

22. (previously presented) Regarding claim 18, Sullivan system the method of claim 16 as described above. Sullivan further teaches wherein said device is a wireless portable computing device operable to connect with said server via a wireless network such that a patient en route to said hospital can complete at least some of said questions prior to arrival at said hospital, (page 4, paragraphs 72 and 75).

Response to Arguments

23. Applicant's arguments with respect to claims 1-18 have been considered but are moot in view of the new ground(s) of rejection.

Conclusion

24. The prior art made of record and not relied upon is considered pertinent to applicant's disclosure.

25. Any inquiry concerning this communication or earlier communications from the examiner should be directed to Amber L. Altschul whose telephone number is (571) 270-1362. The examiner can normally be reached on M-Th 7:30-5, F 7:30-4, every other Friday off.

26. If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Gerald J. O'Connor can be reached at (571) 272-6787. The fax phone numbers for the organization where this application or proceeding is assigned are (571) 273-8300.

27. Any inquiry of a general nature or relating to the status of this application or proceeding should be directed to the receptionist whose telephone number is (571) 272-8219.

28. Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or (571) 272-1000.

/A. L. A./

Examiner, Art Unit 3686

June 5, 2009

/Gerald J. O'Connor/
Supervisory Patent Examiner
Group Art Unit 3686